MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

Jackie Organ

NAME:	Jackie Organ	an	DATE RANGE: July 1 to Sep 13, 2022	July 1 to S	sep 13, 2022								
Date	Two		Expense amount (DO		Mileage		2	Most pordioms	5				for office use
incurred	expense ¹	Purpose of expense and description	NOT incld	driven	calculated	Dundstant	1				MOVC	HST	GL account
			meals) (\$)		\$ 0.51	\$ 13.00	\$ 20.00	\$ 30.00	\$ 10.00	Total Meals			
2022-07-12 Travel	2 Travel	Council		246	125.78			_				16.41	
2022-08-22 Travel	2 Travel	Council		67	34.26					1		4.47	
2022-09-12 Travel	2 Travel	Council		246	125.78							16.41	
					r								
					•								
					•								
										0.51			
					-					,			
					-					•		,	
					1					ı,		1	
					-					•			
					1					•			
					1					-		1	
Comments:					285.82					0.51	,	37.28	
					TOTAL CLAIM: LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY: BALANCE DUE (OWED):	JNT PAID [JIRECTLY I BALA	TOTAL CLAIM: CTLY BY MUNICIPALITY: BALANCE DUE (OWED):	NUNICIPALITY: _ E DUE (OWED): _	286.33 286.33			
I certify that th municipal poli	e amounts cla cies, and were	I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while conducting municipal business.	e with			By approving abides by mup	and signing th	is expense cle policies to t	aim, I am atte he best of my	By approving and signing this expense claim, I am attesting that the claim abides by municipal expense policies to the best of my knowledge	j ii		
Claimant's name	ne	Signed	Date		\N.	Approver's name	The state of the s	Signed		MICIO!			

¹Type of expense: PD = professional development (includes course/conference registration), travel (includes accommodations, transportation, mileage, parking), meals or other ²Purpose of expense = name and location of conference, meeting, municipal event, etc.